



Division Guideline #17

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Revised April 25, 2012
Revised April 16, 2014

Title: Rate Development and Service Authorizations for Out-of-Home Respite – ¼ Hour and Temporary Residential Services – ¼ Hour

Application: DD Comprehensive and Community Support Waivers (effective 7/1/11), Autism Waiver (effective 7/1/12), and DD Partnership for Hope and MOCDD Waivers (effective 10/1/13)

Background

The July, 2011 renewal of the DD Comprehensive Waiver and Community Support Waiver allowed Out-of-Home Respite service to be authorized on an hourly basis in addition to a 24 hour unit.

The October, 2013 renewal of the Partnership for Hope waiver allowed Temporary Residential Service to be authorized on a ¼ hour basis in addition to a 24 hour unit.

To promote consistency in the administration of Out-of-Home Respite and Temporary Residential Service, effective October 1, 2013 Out-of-Home Respite may also be authorized on a ¼ hour (rather than hourly) basis in addition to a 24 hour unit.

The ¼ hour unit is intended to meet short term Out-of-Home Respite and Temporary Residential Service needs at a facility providing these services.

To accommodate billing and audit requirements, a date of service runs from 12:00 a.m. to 11:59 p.m.

Rate Development for ¼ Hour Out-of-Home Respite and ¼ Hour Temporary Residential Service:

Based on (and not to exceed) the provider's contracted daily Out-of-Home Respite and/or Temporary Residential Service rate, the Regional Office and provider shall develop a rate per ¼ hour which supports the provision of short term services (less than 24 hours) by dividing the daily rate by 96 units.

Example: Provider has a daily rate of \$100.00.

$$\$100.00 \text{ Daily Rate} \div 96 - \frac{1}{4} \text{ hour units} = \$1.04 \text{ per } \frac{1}{4} \text{ hour}$$

If the rate per $\frac{1}{4}$ hour arrived at using the above process is insufficient for the provider to offer short term Out-of-Home Respite and/or Temporary Residential Service, a higher rate may be negotiated that does allow for the provision of short term services. If this method is used, the higher negotiated rate multiplied by 96 units will exceed the approved contracted daily rate. In this case, the number of units authorized per day must be reduced so as not to exceed the provider's contracted daily rate. Services are authorized in $\frac{1}{4}$ hour units until the maximum daily rate is met. At that point, the total $\frac{1}{4}$ hours authorized are equivalent to a full day of service.

Example: Provider has a daily rate of \$100.00. To enable the provision of short term Out-of-Home Respite and/or Temporary Residential Service, the Regional Office and provider agree to a rate of \$2.50 per $\frac{1}{4}$ hour.

$$\$100.00 \text{ Daily Rate} \div \$2.50 \text{ per } \frac{1}{4} \text{ hour} = 40 - \frac{1}{4} \text{ hour units maximum authorization per day}$$

Using this example 40 - $\frac{1}{4}$ hour units of authorized service equates to a full day of Out-of-Home Respite and/or Temporary Residential Service. The service is delivered in $\frac{1}{4}$ hour increments up to 40 units per day. At the point 40, $\frac{1}{4}$ hour units are authorized, the consumer may receive services between 10 and 24 hours as the *equivalent* to the provider's full daily rate has been authorized.

The provider and responsible Regional Office shall:

- Determine a rate for each Out-of-Home Respite and/or Temporary Residential Service provider which supports the provision of these services on a $\frac{1}{4}$ hour basis and the maximum number of $\frac{1}{4}$ hour units that may be billed in any 24-hour period.
- Develop a written agreement which documents the $\frac{1}{4}$ hour rate and number of units equivalent to a full day of service.
- Revise the written agreement whenever the contracted daily rate changes.
- Provide the rate per $\frac{1}{4}$ hour unit of service and the number of $\frac{1}{4}$ hour units that are equivalent to a day's service to support coordinators upon execution of written agreement with provider and upon each revision.

Authorization and Billing of Services

Out-of-Home Respite is authorized using CIMOR procedure code T1005 RESPITE CARE SERVICES, 15 Minute(s) which is an "as prescribed" unit of service. The dollar amount authorized is based on the number of $\frac{1}{4}$ hour units of anticipated service multiplied by the rate per $\frac{1}{4}$ hour. The total dollar amount authorized for any 24 hour period may not exceed the established daily rate.

Temporary Residential Service is authorized using CIMOR procedure code T2017 HABILITATION RES WAIVER 15 MIN which is an "as prescribed" unit of service. The dollar amount authorized is based on the number of $\frac{1}{4}$ hour units of anticipated service multiplied by the rate per $\frac{1}{4}$ hour. The total dollar amount authorized for any 24 hour period may not exceed the established daily rate.

Authorization and Billing Scenarios

In these examples, the provider and RO agreed to the following:

Daily Rate = \$100.00 / day

Unit Rate = \$2.50 / ¼ hour

Maximum number of ¼ hour units that can be billed in a 24-hour period = 40 (40 units or greater equivalent to full day of service.)

Scenario	Actual Units Provided	Authorization Calculation	Amount Authorized	Date of Service and Amount Billed
An individual arrives at 4pm on 1/1 and leaves at 8pm on 1/1. Total stay = 4 hours.	16 Units	Units provided less than maximum per day; authorization based on actual number of 15 minute units at rate per ¼ hour. 16 units @ \$2.50 = \$40.00 authorized.	\$40.00 / Month	Date of service: 1/1 \$40.00 billed based on 16 units @ \$2.50 each.
An individual arrives at 10am on 1/10 and leaves at 8pm on 1/10 Total stay = 10 hours.	40 Units	Units provided same as maximum per day; authorization based on actual number of 15 minute units at rate per ¼ hour. 40 units @ \$2.50 = \$100.00 authorized.	\$100.00 / Month	Date of service: 1/10 \$100.00 billed based on 40 units @ \$2.50 each.
An individual arrives at 7am on 1/18 and leaves at 9pm on 1/18 Total stay = 14 hours.	56 Units	Date of service: 1/18 7am – 9pm = 56 units exceeding maximum per day. 40 units @ \$2.50 = \$100.00 authorized.	\$100.00 / Month	Date of service: 1/18 \$100.00 billed based on 40 units @ \$2.50 each.
An individual arrives at 6pm on 1/22 and leaves at 1pm on 1/23 Total stay = 19 hours.	76 Units	Date of service: 1/22 Units provided less than maximum per day; authorization based on actual number of 15 minute units at rate per ¼ hour. 6pm-12am = 24 units @ \$2.50 = \$60.00 authorized. Date of service: 1/23 12am-1pm = 52 units exceeding maximum per day. 40 units @ \$2.50 = \$100.00 authorized.	\$160.00 / Month	Date of service: 1/22 \$60.00 billed based on 24 units @ \$2.50 each. Date of service: 1/23 \$100.00 billed based on 40 units @ \$2.50 each.
An individual arrives at 2pm on 1/25 and leaves at 6pm on 1/26. Total stay = 28 hours.	112 Units	Date of service: 1/25 Units provided same as maximum per day; authorization based on actual number of 15 minute units at rate per ¼ hour. 2pm-12am = 40 units @ \$2.50 = \$100.00 authorized. Date of service: 1/26 12am – 6 pm = 72 units exceeding maximum per day. 40 units @ \$2.50 = \$100.00 authorized.	\$200.00 / Month	Date of service: 1/25 \$100.00 billed based on 40 units @ \$2.50 each. Date of service: 1/26 \$100.00 billed based on 40 units @ \$2.50 each.
An individual arrives at 3pm on 2/1 and leaves at 6pm on 2/3. Total stay = 51 hours.	204 Units	Date of service: 2/1 Units provided less than maximum per day; authorization based on actual number of 15 minute units at rate per ¼ hour. 3pm - 12am = 36 units @ \$2.50	\$290.00 / Month	Date of service: 2/1 \$90.00 billed based on 36 units @ \$2.50 each.

		<p>= \$90.00.</p> <p>Date of service: 2/2 12am - 11:59pm = 56 units exceeding the maximum per day. 40 units @ \$2.50 = \$100.00.</p> <p>Date of service: 2/3 12am - 6pm = 32 units exceeding maximum per day. 40 units @ \$2.50 = \$100.00 authorized.</p>		<p>Date of service: 2/2 \$100.00 billed based on 40 units @ \$2.50 each.</p> <p>Date of service: 2/3 \$100.00 billed based on 40 units @ \$2.50 each.</p>
<p>An individual arrives at 6pm on 2/5 and leaves at 1am on 2/6.</p> <p>Total stay = 7 hours.</p>	28	<p>Date of service: 2/5 Units provided less than maximum per day; authorization based on actual number of 15 minute units at rate per ¼ hour. 6pm - 11:59am = 24 units @ \$2.50 = \$60.00.</p> <p>Date of service: 2/6 Units provided less than maximum per day; authorization based on actual number of 15 minute units at rate per ¼ hour. 12am - 1am = 4 units @ \$2.50 = \$10.00.</p>	\$70.00 / Month	<p>Date of service: 2/5 \$60.00 billed based on 24 units @ \$2.50 each.</p> <p>Date of service: 2/6 \$10.00 billed based on 4 units @ \$2.50 each.</p>

Updating Provider Contracts

Once the Regional Office negotiates a ¼ hour an Out-of-Home Respite and/or Temporary Residential Service with the provider and documents the agreed upon rate and maximum units that are equivalent to a full day of service:

- Add **T1005 RESPITE CARE SERVICES, ¼ HR** to the provider contract. This code was added to CIMOR service matrix with an effective date of 7/1/11 under DD Service Category: Community Supports; Org: DD Non-Enrolling Providers, and Diagnosis Group: DD Waiver. Contract rate is set at \$0.00.
- Add **T2017 HABILITATION RES WAIVER 15 MIN** to the provider contract. This code was added to CIMOR service matrix with an effective date of 10/01/2013 under DD Service Category: Community Supports; Org: DD Non-Enrolling Providers, and Diagnosis Group: DD Waiver. Contract rate is set at \$0.00.

¼ Hour Out-of-Home Respite and Temporary Residential Service Authorizations in CIMOR

- CIMOR converts Out-of Home Respite authorizations to a daily unit for billing to Mo HealthNet.
- CIMOR converts Temporary Residential Service authorizations to a daily unit for billing to Mo HealthNet.

Service Claims

- Because the provider rate is set at \$0.00, providers will enter total daily dollar amount for service rendered in the billing calendar when submitting billing.
- T1005 code will map/convert to the HCPCS code “H0045 RESPITE CARE SRVC NOT HOME PER 1 Day” for service claims submitted to MO HealthNet for reimbursement.
- T2017 code will map/convert to the HCPCS code “H0045 RESPITE CARE SRVC NOT HOME PER 1 Day” for service claims submitted to MO HealthNet for reimbursement.

Documentation

- The ¼ hour rate and the maximum number of ¼ hour units that can be billed in a 24-hour period will be documented and maintained by the provider and Regional Office. This agreement will be revised whenever the provider’s contracted daily rate changes (ex. COLA’s or rate adjustments). Provider Relations staff shall provide this information to support coordinators.
- Because ¼ hour authorizations for Out-of-Home Respite are mapped to a daily unit for MO HealthNet claims, MO HealthNet cannot track ¼ hour units in 372 reporting. 372 reporting provides utilization in a given fiscal year for each DD waiver service (number of participants, service unit’s count, and costs), and this information is sent to Centers for Medicare and Medicaid Services. Hence, ¼ hour Out-of-Home Respite service utilization shall be tracked by the Division of DD and submitted to MO HealthNet.
- Because ¼ hour authorizations for Temporary Residential Service are mapped to a daily unit for MO HealthNet claims, MO HealthNet cannot track ¼ hour units in 372 reporting. 372 reporting provides utilization in a given fiscal year for each DD waiver service (number of participants, service unit’s count, and costs), and this information is sent to Centers for Medicare and Medicaid Services. Hence, ¼ hour Out-of-Home Respite service utilization shall be tracked by the Division of DD and submitted to MO HealthNet.
- The provider must document total ¼ hour units an individual receives Out-of-Home Respite and/or Temporary Residential Service, including the units provided beyond the daily maximum specified in the agreement between the Regional Office and provider.

This guideline will be reviewed and updated annually, if needed.